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Bib Data Sheet

CONFIRMATION NO. 4078

SERIAL NUMBER 09/852,239	FILING DATE 05/09/2001 RULE	CLASS 380	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. 01-014
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APPLICANTS
Jay S. Walker, Ridgefield, CT;
James A. Jorasch, Stamford, CT;

**** CONTINUING DATA *******
THIS APPLICATION IS A CIP OF 08/561,668 11/22/1995 PAT 5,768,382
AND A CIP OF 08/624,998 03/29/1996 PAT 5,871,398
WHICH IS A CIP OF 08/497,080 06/30/1995 ABN
AND A CIP OF 08/677,544 08/08/1996 PAT 5,970,143
WHICH IS A CIP OF 08/561,668 11/22/1995 PAT 5,768,382
AND A CIP OF 08/635,576 04/22/1996 PAT 5,779,549

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 07/03/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 11	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 4	
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS
22927

TITLE
Systems and methods to facilitate games of skill for prizes played via a communication network

FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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APPLICANTS Jay S. Walker, Ridgefield, CT; James A. Jorasch, Stamford, CT;				
** CONTINUING DATA ***** This application is a CIP of 09/298,226 04/22/1999 ABN which is a CON of 08/677,544 08/08/1996 PAT 5,970,143 which is a CIP of 08/561,668 11/22/1995 PAT 5,768,382				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/03/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY CT	SHEETS DRAWING 11	TOTAL CLAIMS 14
INDEPENDENT CLAIMS 4				
ADDRESS 22927				
TITLE Systems and methods to facilitate games of skill for prizes played via a communication network				
FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	